

**ATTACHMENT 1**  
**INITIAL REPORT OF THE**  
**EAST VILLAGE REDEVELOPMENT HOMELESS ADVISORY COMMITTEE**

**October 6, 2000**

**BACKGROUND**

**Establishment of Committee**

The East Village Redevelopment Homeless Advisory Committee was created as a mitigation measure by the City's Ballpark Environmental Impact Report to address the potential physical impacts of homeless displacement and migration on East Village and surrounding communities. Identified representatives of local government agencies and social service organizations work along with neighborhood representatives to develop and recommend strategies for combating such potential impacts. The Committee convened six monthly meetings from May through September of 2000.

Committee membership comprises representation from five specific subgroups: community organizations, neighborhood citizens groups, social service providers, government agencies, and City staff. Organizations represented include the Downtown San Diego Partnership, the East Village Association, the East Village Citizens Patrol, the Gaslamp Quarter Association, the San Diego Padres, the Regional Task Force on the Homeless, the Centre City Project Area Committee (PAC) Social Issues Committee, and Centre City Development Corporation. Communities represented include Barrio Logan, Golden Hill, Hillcrest, North Park, and Sherman Heights.

Participating social service providers include the Alpha Project, Catholic Charities, Episcopal Community Services, St. Vincent de Paul Village, the Salvation Army, the San Diego Rescue Mission, Vietnam Veterans of San Diego, and Volunteers of America. Government agencies represented include the San Diego Convention Center Corporation, the San Diego Housing Commission, the County Health and Human Services Agency, and the San Diego Police Department. The City is also represented by staff from the Employee Relations and Special Projects Department, as well as the Economic and Community Development Department (Homeless Services Coordinator).

The Committee established its goals and objectives, based on direction provided by the EIR:

**Mission Statement:** Identify the specific physical impacts of homeless displacement caused by the proposed Ballpark and ancillary development projects on East Village and surrounding communities and work with identified representatives of local government agencies and social service representatives to develop and recommend remedies for those physical impacts.

- Goals:**
1. Determine if number of homeless identified in Ballpark EIR appropriately reflects current situation.
  2. Determine whether homeless are migrating either within East Village or to

- surrounding neighborhoods or Balboa Park as a result of Ballpark and/or ancillary development.
3. Identify any physical impacts resulting from any homeless migration (trash, crime, vandalism, etc.).
  4. Review and evaluate the effectiveness of current methods for dealing with any physical impacts of homeless displacement in the surrounding neighborhood.
  5. Identify any additional problems and issues.
  6. Discuss and formulate solutions to recommend to the City Manager.

### **Baseline Data**

In its earliest sessions, the Committee focused on establishing baseline population figures for the homeless in and around downtown, creating subcommittees to examine and report on the impact of redevelopment, and creation of internal procedures. With time lines in place for assessment of the homeless situation and analysis of recent trends, the Committee was free to begin tracking the early impact of displacement of homeless persons on the region. The Committee accepted as its baseline figures the homeless population estimates established by the Regional Task Force on the Homeless. The Task Force report, "Regional Homeless Profile," (August 1999), has established a gaps and needs analysis for the Citywide homeless population. The gaps analysis shows that the City has a total homeless population of 6,500 persons and has a total shelter bed inventory of 2,331 for a resulting 64% gap between demand and supply. The breakdown of homeless persons by sub-population and available beds is reflected in the following chart.

<b>1999 Homeless Populations and Shelter Beds in City of San Diego</b>				
<b>Population</b>	<b>Estimated Number</b>	<b>Total Beds</b>	<b>Unmet Need</b>	<b>% Unmet Need</b>
<b>Individuals</b>	4,450	1,801	2,649	60%
Single adult men and women	4,000	1,699	2,301	75%
Youth who are alone	450	102	348	77%
<b>Persons in Families with Children</b>	1,050	530	520	50%
<b>Total Homeless Population*</b>	5,500	2,331	3,169	58%

*\*Does not include the estimated 1,000 farmworkers/day laborers*

### **INITIAL FINDINGS**

On June 29, 2000, a subcommittee met at 10:00 p.m. to conduct a physical count of the homeless within the 26-block East Village redevelopment area. The subcommittee observed 247 homeless individuals on that evening within the area bordered by Market Street to the north, Commercial Avenue to the south, 17<sup>th</sup> Street to the east and 10<sup>th</sup> Street to the west. The count was conducted from three vehicles. No attempt was made to locate additional homeless persons who might not have

been easily observed from a passing car. Even so, the numbers of observed homeless exceeded other counts done in previous months (averaging about 180 persons as reported by the HOT Team and other committee representatives), and surpassed the number reported in the EIR of 100.

Based upon the results of the count, the Committee agreed that the numbers of homeless in the East Village has increased perhaps as much as 25% in the past year. This finding is tempered by the realization that the increase in observed numbers might be accounted for in part by three factors: 1) displacement as a result of the construction underway within the Ballpark district, as homeless persons who may have been well hidden in the past are now visible in the East Village, particularly along 11<sup>th</sup>, 12<sup>th</sup> and 13<sup>th</sup> Streets, between Market and Imperial; 2) the dramatic increase in rents throughout San Diego, particularly in SRO's; 3) the closing of the Winter Shelters on April 15 and May 15.

The increase in observed numbers of homeless persons in the East Village is of particular concern to the Committee given a simultaneous reported increase in homeless persons and activity in surrounding areas. Most of the communities represented on the Committee reported an increase in homeless activity since the beginning of construction in the East Village. The Barrio Logan representative reported a total of 132 unduplicated homeless persons on a nightly basis observed in the neighborhood's northern section, up from a total of about 50 in 1999. Similar increases were noted in the Hillcrest/Uptown area, Sherman Heights, and the Gaslamp Quarter. Only North Park reported no change in the number of homeless in their community. Although no representative of Balboa Park participated on the Committee, other community representatives reported an increase in the number of homeless persons seen leaving the park in the morning and returning at night.

Along with more numbers, neighborhood representatives noted a change in the type of activity associated with homeless persons and encampments in their areas. In Barrio Logan, it was reported that more homeless are observed to be visibly impaired, mentally ill and/or inebriated. The homeless in Barrio Logan have an increasingly visible presence and have begun aggressive panhandling, making little attempt to disguise their presence or hide their illicit activities – consuming alcohol and other drugs, engaging in conflicts, etc.

The Gaslamp Quarter Association reported approximately 15 people sleeping on the streets in that area, based on HOT Team report. They also reported an increase in aggressive panhandling, as well as impacts on outdoor dining patrons. The Association observed that many of their “most difficult street people are severely disturbed and/or under the influence of drug and/or alcohol,” and noted that “they are not properly handled by the current system and quickly return to the streets without any long-term rehabilitation.” It is also important to note that not all of this activity, particularly panhandling, is attributable solely to the homeless, and may be engaged in by other street people.

Likewise, the Hillcrest area reported an increase in the numbers of apparently inebriated and/or mentally ill homeless. The “typical” homeless panhandler in Hillcrest, comparatively low profile, primarily young persons, are apparently being replaced by a more aggressive, long-term chronic street population typically associated with the downtown and East Village communities. Similar reports of a change in the face of homelessness were made by most other neighborhoods represented

on the Committee. However, many representatives reported difficulty in identifying homeless persons. (Unless a person is directly asked, or seen sleeping on the street, it is impossible to know for sure whether or not he or she is homeless.)

These anecdotal reports, along with the quantified observations of homelessness in the East Village and other communities, seem to indicate that displacement from the Ballpark district due to construction activities accounts for some of the observed increase in homelessness in the East Village and surrounding communities. The closing of the Winter Shelter and increasing rents also play significant roles. However, it also appears that there are simply more homeless persons in San Diego this year than ever before. The increase is significant and includes numerous special needs subgroups such as the elderly homeless, the physically and mentally disabled, families with children, substance abusers, veterans, and others.

## **PROJECTED TRENDS**

The convergence of several factors, including East Village redevelopment, threaten to increase the numbers of homeless and displaced persons in San Diego within the next year to a level never before seen. Despite many legitimate reasons for confidence and optimism about the future, the struggles of San Diego's least fortunate citizens continue. Several recent events have contributed to the plight of low-income families and single individuals in San Diego County. The impact of economic trends; rise in rents, particularly SRO's; low vacancy rate; reduction in some sources of public support; and/or revision of social safety-net policies have contributed to the hundreds of poor families and individuals existing on the brink of homelessness and have already sent many to the streets. The unprecedented economic growth and stability of the past decade has meant prosperity for most San Diegans. However, for low-income households it has meant desperation.

Local reports from providers of services to the homeless and those at risk of homelessness paint a bleak picture. The 1999/2000 Seasonal Shelter Program operated well beyond its planned capacity. The City had initially committed to providing a total of 650 beds to the homeless at three facilities from December 15, 1999 until April 15, 2000. While this total exceeded the funded capacity of the program in 1998/99 by 100 beds, it was immediately apparent that even 650 seasonal shelter beds would fall far short of the demand this year. In response to a looming crisis, the City increased its funding to cover a total of 750 beds. Even so, overflow shelter provided by the San Diego Rescue Mission, St. Vincent de Paul Village, the Alpha Project, and other agencies were inundated nightly with homeless individuals and families. Altogether, nearly 5,000 unduplicated individuals were sheltered in emergency facilities this past winter.

## **SOLUTIONS CURRENTLY UNDERWAY**

### **Transitional Housing**

The *Centre City Development Corporation (CCDC)* is working to facilitate the creation of transitional housing for mentally ill homeless, as part of the Special Need Homeless Program

adopted by the San Diego City Council on December 1999. Utilizing the Redevelopment Agency's Low and Moderate Income Housing Set-Aside Fund, CCDC seeks to assist in siting, property acquisition, rehabilitation and/or construction of at least 100 beds of new transitional housing for the special needs population by December 2001.

In May 2000, CCDC issued an RFQP to invite qualified mental health service providers, affordable housing developers, non-profit organizations and property owners to submit proposals to develop and operate transitional housing for mentally ill homeless. The emphasis was on facilities designed to house no more than 25 individuals with adequate space for on-site services. Four proposals were received and components of one have already been approved for implementation. Episcopal Community Services was awarded funds by CCDC in September 2000 to develop a 22-bed transitional housing facility at 2822 Fifth Avenue. Rehabilitation construction will begin in December 2000 with completion expected by March or April 2001. Discussions continue with the other transitional housing project sponsors. Also, CCDC is considering participating in the funding of permanent supportive housing projects proposed in the downtown area.

The *Alpha Project* has entered negotiations to acquire and rehabilitate two new facilities which together should add 30 transitional beds to the City's shelter continuum. The proposed beds will serve single adults with substance abuse disorders. Alpha Project has also just assumed operation of the Metro Hotel, a 193-unit SRO complex. Units at the Metro will serve very-low income singles, mostly homeless or formerly homeless. As units are vacated, priority will be given to applicants who are transitioning out of homelessness from emergency shelters, transitional housing, or from the streets.

### **Permanent Supportive Housing**

Simultaneously, the *Housing Commission* has taken the lead in the process of identifying, siting and finding funding for 100 additional units of permanent supportive housing for the severely mentally ill and dually diagnosed homeless, also as part of the City Council's adopted Special Needs Homeless Program. Toward this end, the Housing Commission is working with developers and service providers to generate projects that will be eligible for financial subsidy. One project which is ready to apply for federal tax credits in the next round is the St. Vincent de Paul 70-95 unit low-income apartment project adjacent to the Village on Imperial Avenue. Approximately 25 of these units have been committed to housing mentally ill persons transitioning out of the proposed transitional beds described above. Another potential sponsor submitted an application under the current tax credit round to support 200 units of low income senior housing with 25 units set aside for dually diagnosed or mentally ill seniors. The Housing Commission has also applied to HUD for special purpose Section 8 vouchers which can be used in support of the disabled homeless population, and it is committing 50 of its existing vouchers for the special needs homeless.

### **Emergency Shelter**

The *City of San Diego Community Services Division* is currently reviewing the feasibility of developing a 150-bed year-round emergency shelter for families with children. Of many options

currently available, the most immediate solution appears to be an enhanced sprung structure to be located on City property in the area surrounding downtown. The demand for family emergency shelter in the past winter far exceeded 150 beds nightly, indicating that the proposed facility will be at capacity almost immediately. While the creation of such a facility will greatly alleviate one of the City's most pressing crises, further measures should be considered to deal with overflow demand in the coming months.

On April 3, 2000, the *San Diego Rescue Mission* established a temporary emergency shelter for homeless families, due to the pressing need following the closing of the winter shelters. The average occupancy during the month of September has been about 45-50 persons per night.

### **Outreach and Enforcement**

The *Downtown San Diego Partnership* has commenced its Clean and Safe Program throughout downtown and the surrounding neighborhoods, including East Village. As part of the program, a team of 24 Community Ambassadors is deployed on foot and bicycles throughout the area. The Community Ambassadors, a team of dedicated men and women, are trained to assist local law enforcement identify crime and public safety issues. The Community Ambassadors received one full month of classroom and field instruction from such organizations as the San Diego Police Department, the American Civil Liberties Union, the Metropolitan Transportation Development Board, the San Diego Convention and Visitors Bureau, the City Attorney's Office and the Homeless Outreach Team. Equipped with communication devices, Community Ambassadors serve as extra "eyes and ears" in downtown. In this capacity, the ambassadors' duties include: helping deter crimes; working with the Homeless Outreach Team (HOT) to provide social service outreach referrals; assisting with directions and information; and maintaining open communication with police to report on-going public-safety issues.

In addition, the downtown property owners approved a budget that allocates \$75,000 to fund a full-time Psychiatric Emergency Response Team (PERT) clinician, which is one of the critical components to the successful downtown HOT team.

The *San Diego Police Department's HOT Teams* continue to serve as a vital resource in homeless related issues, providing adjunct services to providers of shelter and services throughout the City and advising in policy-setting bodies including the Committee. The HOT Teams have proven to be a very effective tool in dealing with urban area homeless, particularly in the downtown area. The HOT Teams are funded by the City of San Diego Police Department, with contributions from the County of San Diego, CCDC, and the Downtown San Diego Partnership's Clean and Safe Program. The HOT Teams recently moved headquarters out of the downtown area to Pacific Beach, but are looking for new space downtown. The City's Psychiatric Emergency Response Teams (PERT) are another critical law enforcement tool that couple professional social work staff with specially trained police officers to respond to psychiatric calls involving homeless persons.

Since January 2000, the *San Diego Police Department Western Division* has implemented a Serial Inebriate Program which targets the hardest to reach and treat chronic inebriate homeless in the beach areas, Hillcrest and North Park. This is a collaborative program with the County

Health and Human Service Department, Sheriff, Probation, the City Attorney's Office, and the Court system. Under State Penal Code Section 647(f), individuals with more than three convictions for being drunk in public are given the option of receiving jail time (usually 90 days), or participating in a treatment program for the same period. Preliminary results indicate that the program has had some success in treating these chronic inebriates, many of whom have been drunk on the streets for 10 years or more, and have cycled in and out of hospitals and jails for years.

## **FUTURE POTENTIAL SOLUTIONS**

*Catholic Charities Rachel's Women's Center* has undertaken to establish a Late Night Center in addition to its matrix of services. The Late Night Center is intended for women who do not, can not or will not access traditional shelter services. The Center is not designed as an alternative to traditional night shelters or for women who disregard shelter standards and regulations. The proposed Late Night Center offers the first step in a triage process which is critical in establishing the rapport necessary to transition the most severely mentally ill, treatment resistant homeless women into longer term service and shelter options. The proposed Late Night Center will become the only walk-in Center for women accessible during non-traditional service hours.

A joint proposal was submitted under AB 2034 from the *City of San Diego and County of San Diego Health and Human Services Agency* to the State Department of Mental Health for \$3.6 million (\$5.4 million annualized) to develop and operate a program for the hardest to reach mentally ill homeless. This collaborative effort included CCDC, the San Diego Housing Commission, the County Sheriff and Probation, the San Diego Police Department and many non-profit service providers. The goal of the proposal is to reach 200 mentally ill homeless persons and place them in housing and treatment over the course of eight months beginning in December 2000. The City/County proposal has been selected to go forward to the second interview phase on September 29. Final decisions on grant awards by the State Department of Mental Health are expected by mid-October.

## **COMMITTEE RECOMMENDATIONS**

The problem of homelessness in San Diego involves innumerable variables and a solution will require a strategy that addresses each of those variables at its root. The Committee has explored the problem of homelessness very specifically. Notwithstanding all of the variables contributing to homelessness, the impact of East Village redevelopment can best be addressed in the near future through certain concrete steps. These have been divided into short and long term solutions, as described below:

### **Recommended Short Term Solutions**

The Committee recommends the following action steps that will have the most immediate impact on the area. These steps will not solve homelessness – they are intended to mitigate the displacement of homeless persons in the area surrounding the proposed ballpark and related

development.

1. Preserve and Create Shelter Beds and Low-Cost Housing

The City, County, and State have made available unprecedented levels of funding to create new shelter and low-cost housing throughout the region. However, even with all new programs at full capacity, the city's inventory of shelter beds, and low-cost transitional and permanent supported housing will fall far short of housing all homeless persons in the East Village and surrounding neighborhoods. Development in other parts of the city threatens to worsen the situation by eliminating hundreds of SRO units that now house persons who will have nowhere else to go. Consequently, the Committee strongly recommends that the City continue to prioritize homeless shelters and low-cost housing in its funding decisions. As in past years, the Committee hopes that each Council District will commit a significant portion of its CDBG funding to homeless projects. Likewise the Committee recommends that any available funds from the City's General Funds be devoted to homeless shelter, housing and programs.

2. Increase Public Sanitation Facilities

There are currently only two public restrooms available for the use of street people in the downtown area. Additionally, the San Diego Rescue Mission offers showers to 30-50 men three times per week, as well as public access to restrooms from 5-7 a.m. Given the size of the downtown homeless population, this has inevitably resulted in urination and defecation in public areas. The Committee recommends that the City of San Diego and CCDC immediately begin working on a program to install self-cleaning public toilets in convenient locations throughout the downtown area, as has been done by many other U.S. and European cities.

3. Extend Seasonal Shelter Period

Many of the long-term solutions mentioned throughout this report are several months away from implementation. Additional shelter beds and supportive housing units are expected to be available over the next year, but they will not be sufficient, and in the interim the demand for existing beds is expected to continue to increase. Consequently, the Committee recommends that the planned Seasonal Shelter period be prolonged to May 30, 2001. Not only will this extension provide significantly more bed nights, it will also assure that the closure of the shelter will be during a time of moderate weather. The Committee also recommends that shelter locations be sought throughout the City to avoid disproportionately burdening any one or a few neighborhoods.

4. Continue HOT Team Support

The Committee recommends that all parties continue their funding of the HOT Teams, and that one of the HOT Teams return to operating out of an office in the downtown area to facilitate interactions with the hard to reach downtown homeless population. It does not appear at this time that it is necessary to add new HOT Team personnel in the downtown area. A more pressing need is for the beds, facilities and programs to treat the homeless referred by the HOT Team, which are currently being developed by the both the City and County in collaboration.



5. Expand Serial Inebriate Program and Alcohol Treatment Facilities

The Committee recommends that the Police Western Division pilot program for Serial Inebriates be expanded to include the downtown area. Public inebriation, particularly among the homeless population, is a major issue in downtown and immediately surrounding areas. This program would give the HOT Team and other police officers options for dealing with this issue beyond taking the perpetrator to a continual cycle of jail, emergency room or detox center, where they are generally back out on the street in a matter of hours or days. In order to accomplish this, capacity at the existing Volunteers of American (VOA) detoxification program must be expanded, and beds need to be added to short and long term alcohol and drug treatment programs. Additionally, the involuntary time spent at the VOA Inebriate Reception Center should be expanded from four hours to up to just short of 24 hours.

6. Create Community Court to Serve Downtown Area

The Committee recommends that the community court concept that is being implemented in the Mid-City area be expanded to the downtown area. This court functions as an arraignment court for low-level non-violent misdemeanor offenders such as prostitutes and drug addicts involved in criminal activity, and could potentially become part of the Serial Inebriate Program. The community court concept joins social service providers with the criminal justice system to provide appropriate punishment, rehabilitation services and restitution to the community.

7. Report to Homeless Services Coordinator

Currently the Homeless Services Coordinator for the City of San Diego serves as the liaison for the HOT Team, social service providers, citizens, and homeless persons. The Coordinator facilitates solutions to specific situations and to general issues related to homelessness within the City of San Diego. The Committee recommends that the Homeless Services Coordinator's role be publicized more effectively to citizens and business owners, and that this position serve as the clearinghouse for resolution of all complaints about homeless issues for the downtown and nearby community areas.

8. Continue and Improve City/County and other Agency Collaboration

City and County staff have begun working more closely together over the past six months in preparing the AB 2034 proposal, dealing with Winter Shelter funding issues, and working on special needs homeless issues downtown. This collaboration, which has also included the Housing Commission and CCDC staff, as well as a number of homeless non-profit service providers and other groups, has already yielded results, and is the best way to secure outside funding and achieve significant progress in addressing homelessness. The Committee recommends that this collaboration continue and be strengthened through the development of joint projects to serve the homeless and joint applications to secure funding. The Joint City/County Task Force comprised of two City Councilmembers and two Board of Supervisors members should continue to meet to address collaborative solutions.

**Issues and Future Solutions**

Beyond the primary recommendations above, long-range solutions to homelessness in the City will entail a comprehensive approach involving many parties and services. The role of the City will be critical, as a catalyst for creating the public and private partnerships necessary to bring together shelter and services in effective programs that will enhance the community. The inter-generational nature of homelessness and dependence tends to predispose the children of currently homeless adults to repeating the cycle in years to come. Breaking the cycle means creating opportunities and opening doors to a way out.

### Affordable Housing

The City's most effective tool for combating the impact of East Village redevelopment on homelessness, and for combating homelessness generally, is the creation of affordable housing units. At present there are approximately 2,100 transitional housing beds across the City. With the opening of the year-round family shelter project, there will be over 450 emergency shelter beds. The proposed 100 beds of transitional shelter for the mentally ill homeless currently under development will bring the combined total of emergency and transitional beds to almost 2,700 in the City. With a total homeless population in the City of between 5,500 and 6,000, the current inventory of transitional and emergency beds amounts to nearly one bed for every two homeless persons. The ratio is much worse for certain special needs populations, such as the mentally ill, chronic inebriates and dually diagnosed.

However, the current inventory is demonstrably inadequate to address the City's total homeless population. All providers of emergency shelter report protracted waiting periods when attempting to move homeless clients into transitional programs, and transitional shelter operators encounter even longer waiting periods for placement in permanent affordable housing for clients exiting shelters. The State of California's \$188 million Multi-family Housing Program offers relief to low-income families through rental subsidies, but will not likely generate new production of affordable units in the city. Many existing SRO units are threatened by redevelopment and apartment rents continue to rise as the market remains at 97% of full occupancy.

Geographic disbursement of new units will be an important part of dampening the impact of redevelopment. In fact, the prevalence of homelessness in the redevelopment area has been a historical consequence of growth and lack of affordability in other districts. A community representative on the Committee put the matter fairly succinctly saying that, "The problem of homelessness in the East Village has persisted mostly because it has been contained. Redevelopment means losing that containment."

In the next fiscal cycle, the City can address the shortage of affordable housing in a number of ways. Targeting City funds to projects that would add affordable units will be the most effective way to do so immediately. The San Diego Housing Commission has done this through use of Housing Trust Fund moneys to support low income projects. Where necessary, the City may be forced to consider zoning changes or changes to the Conditional Use Permit process to create

housing in the areas of greatest need. The City must take advantage of the opportunity created in the East Village to avoid replicating the problem in some other neighborhoods. The creation of hundreds of affordable housing units across the City will not only alleviate the glut in existing shelter programs, it will also ensure that the former problems of East Village do not become the new problems of adjacent communities.

### Training

As more and more of the San Diego employment base moves toward service industry jobs and technical positions, competition for jobs will demand that even entry level workers possess basic adult education skills and be computer literate. To effectively interrupt the pattern of homelessness and poverty, programs targeting basic educational proficiency need to be made available to the city's low-income population.

To be effective, education and training opportunities for the homeless should be incorporated into a network of other services allowing the homeless to access those opportunities easily. Support structures including case management must be an integral part of such education and training in order to maximize its effectiveness. It is equally critical that education aimed at the homeless be presented in a culturally and linguistically appropriate context in order to avoid ostracizing those target populations outside the mainstream of services.

### Employment

The homeless and formerly homeless face many barriers to employment including a lack of job history and lack of residential stability. Homeless persons re-entering the workforce, or perhaps entering the workforce for the first time, need opportunities to begin with part-time employment while residing in transitional housing. While employed, job skills need to be learned as a part of acquiring the daily living skills that underlie long-term employment. Employment opportunities for the homeless must allow for special needs subgroups to seek the additional support such as mental health counseling, substance abuse recovery, etc. that will support permanent self-sufficiency. Likewise, jobs for homeless and formerly homeless persons need to guarantee a living wage in order to break the cycle of poverty. Minimum wage work will support the cost of living in a shelter; it will not support a household.

### Child Care

Access to training and employment requires that homeless and formerly homeless parents have access to safe, adequate childcare. Too many low-income parents face the daily dilemma of either staying home or leaving their children in inadequate, unsafe conditions. Even older children require before and after school care in an environment that not only allows parents the freedom to work or seek training, but also nourishes the developmental needs of children.

### Substance Abuse Treatment

Successful substance abuse treatment programs targeting the homeless generally focus on remaining drug and alcohol-free and developing a network of support for lifelong recovery.

Additional services and client success hinge on this one important aspect of homeless services. At least one-third of all homeless adults are dependent on alcohol or other drugs. Long before any other services can have success, the substance abusing homeless need direct intervention. Often this means supervised detox, then short-term intensively case managed housing, then transitional housing, and eventually independent living.

In order to succeed with the hardest to serve, substance abuse treatment programs must include an effective outreach component, community networking, referral and collaboration. Most homeless clients seeking substance abuse services will have related conditions that should be treated. This requires assessment with respect to their general health, mental health, substance abuse patterns, psycho-social history, and other needs. Collaborative arrangements with providers of other services are key to the success of treatment programs, allowing the substance abuser to benefit from a matrix of interconnected services. The City and County are currently working on expansion of alcohol and drug treatment beds to serve the homeless in the downtown area.

#### Primary and Mental Health Care

Most persons who have experienced a prolonged period of homelessness present serious health problems. Homeless persons are at increased risk of poor health due to a number of factors including: a greater risk of trauma resulting from violence, lack of good nutrition, addiction disorders, lack of access to maintain good personal hygiene, and lack of insurance, contributing to many poor and homeless people delaying health care until preventive medicine is no longer feasible.

The cost of the *status quo* is monumental. A recently published study of 9,000 veterans admitted to VA hospitals found that of all patients admitted, 35% were homeless, and that for each admission, homeless veterans utilize an additional \$3,141 per admission compared to their housed counterparts.

Prenatal and pediatric care are particularly important for the homeless, in order to prevent ill health in children and to give them the tools they need for the future. Other critical needs include HIV outreach and treatment, particularly to intravenous drug users, dental care, and psycho-pharmaceutical treatment.

## **CONCLUSION**

The Committee recommends the following specific steps to address the impact of East Village redevelopment. These steps will not solve homelessness – they are intended to mitigate the displacement of homeless persons in the area surrounding the proposed Ballpark and related development.

- 1. Preserve and create homeless shelter beds and low-cost housing**
- 2. Increase public sanitation facilities in downtown**

- 3. Extend seasonal shelter period to May 30**
- 4. Continue HOT Team support and add an office downtown**
- 5. Expand the Serial Inebriate Program and alcohol treatment facilities in downtown area**
- 6. Create Community Court to serve downtown area**
- 7. Report all homeless incidents and issues to Homeless Services Coordinator**
- 8. Continue and improve City/County and other agency collaboration on homeless issues**

While these action steps will ease the citywide impact of homeless displacement, they do not address the much larger issue of poverty and homelessness as it affects thousands of San Diegans in every district.

The Committee stresses the importance of a comprehensive approach to addressing homelessness in the city. A long-term solution to homelessness will require the involvement of both public and private offices and will span many sectors including health and human services, economic development, the building industry, training and education, as well as shelters, soup kitchens, and other service providers. Any such solution must address the underlying causes of homelessness and will require inter-generational and inter-governmental strategies to break the cycle of homelessness before it begins.

Dealing with the projected impact of East Village redevelopment is one important part of lessening the *consequences* of homelessness. However, the steps recommended herein do not, by themselves, have any impact on the *causes* of homelessness. In most cases, homelessness itself is the end result of numerous psycho-social and economic forces. Those forces can be addressed, and must be addressed in the future in order for San Diego to stem the burgeoning tide of homeless and displaced persons within its boundaries.

## **EAST VILLAGE REDEVELOPMENT HOMELESS ADVISORY COMMITTEE**

### Members and Alternates

Fred Baranowski, Downtown Partnership  
Sgt. Scott Bender, HOT Team, San Diego Police Department  
Jodi Billingsley, County of San Diego  
Father Joe Carroll, St. Vincent de Paul  
Peter Dennehy, North Park Community  
Sister RayMonda duVall, Catholic Charities  
Ann Fathy, PAC Social Issues Committee  
John Graham, San Diego Police Department  
Bob Grinchuk, Hillcrest/Uptown Community  
Charles Hansen, Salvation Army  
Angela Harris, East Village Citizens Patrol  
Kathi Houck, San Diego Housing Commission  
Jonathan Hunter, Episcopal Community Services  
Caryl Iseman, East Village Association  
Jim Jackson, San Diego Rescue Mission  
James Justus, Sherman Heights  
John King, Salvation Army  
Harvey Mandel, St. Vincent de Paul  
Dennis Martinek, Regional Task Force on the Homeless  
Daryl Mayakawa, San Diego Convention Center  
Bob McElroy, Alpha Project  
Larry Milligan, Homeless Advocate  
Marian Moore, Volunteers of America  
Bob Morris, Episcopal Cmty Services  
Diana Muller, Gaslamp Quarter Association  
Luis Murillo, Barrio Community  
Dave Nielsen, San Diego Padres  
Rachel Ortiz, Barrio Community  
Justin Paulhamus, Downtown Partnership  
Tony Phillips, Alpha Project  
Martha Ranson, Catholic Charities

Michael Robb, San Diego Convention Center  
Dale Royal, Centre City Development Corporation  
David Siegler, Vietnam Veterans of S an Diego  
John Smith, HOT Team, San Diego, Police Department  
Cameron Stone, Volunteers of America  
Steve Stratman, Golden Hill Community  
Tricia Tellier, Gaslamp Quarter Associaton  
John Thelen, Regional Task Force on the Homeless  
Christine Thompson, Golden Hill Community  
Louise Torio, Sherman Heights Community  
Nancy Williams, San Diego Housing Commission  
Jeff Zinner, Centre City Development Corporation

Staff

Ann Hix, Special Projects, City of San Diego  
Janet MacFarlane, Special Projects, City of San Diego  
Ron Thurlow, Community Services, City of San Diego